
Exhibit “W”

2305558036003

PROGRAM:	CAPREPA	EXPERIAN - CONSUMER ASSISTANCE - CAPS	PAGE: 1																																																																																																																																																																																																																																																																									
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EXPDRH 000012

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PROGRAM:	CARREPA	EXPLAN - CONSUMER ASSISTANCE - CARS	PAGE: 1																						
RUN DATE:	07/19/2011	Auto Response:																							
RUN TIME:	23:59:48	ACCOUNT #:																							
SUBCODE:	1729490	SUBSCRIBER:	Cardworks Servicing																						
DISPUTE REASON:	112 - Claims Inaccurate information. Did not provide specific dispute. Provide complete ID and verify account information. I HAVE REQUESTED DEBT VALIDATION RECEIVED NOTHING. I WILL MAIL COPIES OF MY CORRESPONDENCE TO SUPPORT THIS CLAIM.																								
REMARKS:	CONSUMER IDENTIFICATION																								
Name:	MICHAEL DREHER	SUBSCRIBER CONSUMER ID																							
SSN:	DOB:																								
Cur Address:																									
ZIP:																									
Prev Addr 1:																									
Prev Addr 2:																									
Account Name:																									
RESPONSE:	01 - Account information accurate as of date reported.	ON PROFILE	CONSUMER CLAIMS																						
TRADE INFORMATION	SUBSCRIBER RESPONSE	CHARGE OFF/DEL 180																							
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Balance:	Balance Date:																								
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Credit Limit/Orig Arnt:																									
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Portfolio Name:																									
Date Last Pay:																									
Open Date:	Closed Date:																								
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Response History Grid																									
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PROGRAM:	CAPRESPA	EXPERIAN - CONSUMER ASSISTANCE - CAPS	PAGE: 1																						
RUN DATE:	07/27/2011	ADV Response																							
RUN TIME:	12:18:57	Auto Response: Printed - Dispute Code																							
SUBCODE:	1435480	ACCOUNT #:																							
DISPUTE REASON:	103 - Consumer claims true identity fraud - account fraudulently opened. Provide complete ID. NEVER LIVED IN INDIANA																								
REMARKS:	CONSUMER IDENTIFICATION																								
Name:	MICHAEL T DREHER	SUBSCRIBER CONSUMER ID																							
SSN:																									
Cur Address:																									
ZIP:																									
Prev Addr 1:																									
Prev Addr 2:																									
Account Name:																									
RESPONSE:	01 - Account information accurate as of date reported.	ON PROFILE	CHARGE OFF/DEL 180																						
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Act Status/Rating:																									
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CL:	ECOA:	1																							
Balance:	Balance Date:	16.176	05/13/2011																						
Ant Past Due:		16.176																							
Orig Delinq Date:																									
Credit Limit/Orig Amt:		16.416																							
High Credit Balance:		16.170																							
Charge Off Amt:																									
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Date Last Pay:		01/03/2011																							
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Type:	Term:	84	REV																						
Original Creditor:																									
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